

Testimony of
Ann G. Knowles, President

**The Impact of Operation Iraqi
Freedom/Operation Enduring
Freedom on the Claims Process**

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Introduction

Mr. Chairman, members of the committee, it is truly my honor to be able to present this testimony before your committee. As President of the National Association of County Veterans Service Officers, I am commenting on:

- The impact of Operation Iraqi Freedom and Operation Enduring Freedom on the Veterans Administration Claims Process

The National Association of County Veterans Service Officers is an organization made up of local government employees. Our members are tasked with assisting veterans in developing and processing their claims. We exist to serve veterans and partner with the National Service Organizations and the Department of Veterans Affairs to serve veterans. Our Association focuses on outreach, standardized quality training, and claims processing. We are extension or arm of government, not unlike the VA itself in service to the nation's veterans and their dependents.

The Relationship Between CVSOs and the VA

The relationship between the Department of Veterans Affairs (DVA) and the County Veterans Service Officers (CVSOs) throughout our great nation has traditionally been professional and mutually advantageous. The DVA has assisted CVSOs in providing limited training and access to information the DVA holds on the CVSO's clients. The CVSO serves as the entry point for a large majority of disability and pension claims nationwide for the local veteran to access the services offered by the DVA. Most veterans view the local CVSO as "The VA" and do not realize that the DVA and the CVSO are not one and the same.

NACVSO sees the role of county veteran's service officers as one of advocacy and claims development in concert with the veteran or dependent at the grassroots level.

Our members sit across the desk from our veterans everyday. Because of this direct access to our veterans, we believe we are in the position to assist the DVA in claims development in an unprecedented way. Developing complete and ready to rate claims eases the burden on the DVA's backlog or inventory of claims.

The process begins with a face to face, in depth interview between the veteran and the CVSO. This initial interview accomplishes many things. It builds a trust between the veteran and the CVSO and provides the veteran with a basic understanding of how the DVA system works. The CVSO honestly explains the process with the veteran while building realistic expectations for the veteran. This results in lessening the impact of frivolous claims or unrealistic appeals that the DVA is mandated to process and develop.

Once complete, the application package is passed on to a state or national service office for review and presentation to the VA regional office of jurisdiction. Any hearings or additional records required can be obtained by the CVSO of record if needed.

Once the rating decision is made and received by the veteran, the veteran nearly always returns to the CVSO for an explanation. The CVSO then interprets the decision for the veteran and explains what the decision means. The CVSO reviews the rating decision for accuracy and explains the veteran's benefits. If an appeal is warranted, the CVSO can explain a notice of disagreement and assist the veteran with the preparation of the appeal. The CVSO can also limit frivolous claims through proper guidance and counsel to the veteran without further bogging down the system. We believe this division of responsibility, between two arms of government, benefit the veteran, the CVSO and the DVA and have the potential to provide a clearer understanding for the veteran of the process of claims development and how the DVA system works.

Issues affecting Veterans of OIF/OEF

The returning veterans from these two theaters of action have been receiving priority care from the Veterans Administration. There are valid reasons but it has resulted in many other claims being placed on the back burner claims that have equally valid reasons for priority action. VA officials have stated the number of claims filed since 2000 has risen nearly 40% and this has caused the number of cases pending to balloon to over 800,000. Yet, only about 4% of the new claims are from Iraq and Afghanistan (St Louis Post dispatch February 26, 2007). To stay on target with the subject at hand, let us look at the numbers and nature of injuries of OIF and OEF veterans. It has been reported by the DOD that over 19,000 Purple Heart Medals have been awarded since the beginning of

OIF/OEF. Each of these is a potential claim for benefits with the DVA. Add to this another 25,000 wounded and ever escalating KIA numbers as additional troops are assigned to Iraq. Secretary Nicholson, in his interview with Bob Woodward of ABC News, showed statistics of treatment within VA facilities of over 200,000 OIF/OEF veterans. Not every treatment is a claim, but even a small percentage of these filing a claim for benefits will escalate the numbers in the pipeline waiting processing.

Post-Traumatic Stress Disorder Veterans is recognized in the returning veterans from Iraq and Afghanistan their treatment has been given priority. A United States Army study places those suffering from PTSD at approximately one in eight soldiers who have served in either Iraq or Afghanistan. A survey of deployed troops indicates that 12% of those serving in Iraq and up to 6% who served in Afghanistan have reported symptoms of major depression, anxiety or PTSD. The most frightening statistic is that only 38 % of those were interested in getting help and as low as only 23%. They cited concerns for how they would be viewed by their peers if they sought assistance. This, Mr. Chairman, is a ticking time bomb that will eventually blow up in our faces. Not necessarily in the face of the military but in local communities where the veterans are returning to their homes. CVSOs and VA will be forced to deal with these issues because local officials and families concerned about the mental health of these young men and women will demand it. And it is.....A sad state of affairs indeed.

Another issue is the number of veterans who are returning with missing limbs and prosthetic devices. Battlefield treatment, and speed of evacuation of wounded servicemen and women, has advanced substantially over the years. Many of the veterans returning from the Gulf Region needing specialty care for missing limbs may well have

died in previous conflicts. This has placed a tremendous and vital responsibility on the Veterans Administration that they are ill equipped to deal with, in health and medical care but also to provide adequate, timely and fair compensation decisions for the veterans and their families who are desperately trying to survive.

Other Issues

An issue must be addressed is that of placing one group of veterans in a higher priority or “Class” than other veterans. When the VA decides to give “Top Priority” to a select group of claims, the other claims, veterans, suffer. Some claims that have languished for a year or more suddenly become less likely to be rated or receive appropriate attention because of a change of policy. This is because personnel in the Regional Office have been instructed to focus on OIF/OEF veterans claims to the detriment of other claims that have been working their way through the backlog or inventory of claims. We feel this is tragic and extremely inappropriate. Veterans continue to “die while waiting for VA benefits”.

We are concerned with the VA’s centralization of OIF/OEF claims. We are not convinced that the practice can be justified. When Regional Office claims are “brokered out”, the focus becomes quantity and not quality. Issuing flawed rating decisions just exacerbate the inventory or backlog of and further inflate the boated backlog of appellate litigation.

Suggested Solutions:

One solution would be to re-emphasize the Benefits Delivery at Discharge (BDD) program as a “Pre-separation Program”. Claims and medical reports could be submitted

prior to separation allowing local VA teams to adjudicate the claims and dramatically shorten the time that the veteran has to wait for a decision after separation.

Secondly, streamlining single-issue disability claims at the Regional Office level while multi-faced claims that have a combination of disabilities that require extensive research are passed to Tiger Teams would speed the process.

Another suggested solution is to increase outreach efforts. Outreach efforts must be expanded in order to reach those veterans and dependents that are unaware of their benefits and to bring them into the system. The National Association of County Veterans Service Officers believes that we must do better. Approximately 88 plus % of veterans not being compensated is more likely than not an issue if lack of access or knowledge of available services rather than lack of need or some other issue.

NACVSO supports HR 67 introduced by Congressman Mike McIntyre, of North Carolina that would have allowed Secretary Nicholson to provide federal – state – local grants for assistance to state and county veterans service officers to enhance outreach to veterans and their dependents. We also support the Bill introduced by Congressman Baca of California which would have a significant impact upon the existing claims backlog.

NACVSO stands ready to partner with the Veterans Administration to bring about a reduction in the backlog and increase the outreach efforts to the veterans of our communities.

Conclusion

The bottom line is that the Veterans Administration is going to have to rise to the occasion and place more personnel to handle the expected large influx of new claims and the resulting larger inventory or backlog of claims.